

FILED

JUL 01 2008

RICHARD W. WIEKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

E-filing

(PR)

WHA

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

Michael J. Crummer

CV

08

3158

Plaintiff,

CASE NO. \_\_\_\_\_

vs.

People of the State of California

PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS

Defendant.

I, Michael J. Crummer, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes \_\_\_ No X

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: N/A Net: \_\_\_\_\_

Employer: N/A

If the answer is "no," state the date of last employment and the amount of the gross and net salary

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PAUPERIS, Case No. \_\_\_\_\_

1 and wages per month which you received. (If you are imprisoned, specify the last place of  
2 employment prior to imprisonment.)

3 N/A

4  
5  
6 2. Have you received, within the past twelve (12) months, any money from any of the following  
7 sources:

8 a. Business, Profession or Yes \_\_\_ No X  
9 self employment

10 b. Income from stocks, bonds, Yes \_\_\_ No X  
11 or royalties?

12 c. Rent payments? Yes \_\_\_ No X

13 d. Pensions, annuities, or Yes \_\_\_ No X  
14 life insurance payments?

15 e. Federal or State welfare payments, Yes \_\_\_ No X  
16 Social Security or other govern-  
17 ment source?

18 If the answer is "yes" to any of the above, describe each source of money and state the amount  
19 received from each.

20 N/A

21  
22 3. Are you married? Yes \_\_\_ No X

23 Spouse's Full Name: N/A

24 Spouse's Place of Employment:                     

25 Spouse's Monthly Salary, Wages or Income:

26 Gross \$ N/A Net \$                     

27 4. a. List amount you contribute to your spouse's support : \$                     

28 b. List the persons other than your spouse who are dependent upon you for support  
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and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

N/A

5. Do you own or are you buying a home? Yes ☐ No ☒

Estimated Market Value: \$ N/A Amount of Mortgage: \$                     

6. Do you own an automobile? Yes ☐ No ☒

Make N/A Year                      Model                     

Is it financed? Yes ☐ No ☐ If so, Total due: \$                     

Monthly Payment: \$                     

7. Do you have a bank account? Yes ☐ No ☒ (Do not include account numbers.)

Name(s) and address(es) of bank: N/A

Present balance(s): \$                     

Do you own any cash? Yes ☐ No ☒ Amount: \$                     

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ☐ No ☒

8. What are your monthly expenses?

Rent: \$ N/A Utilities:                     

Food: \$                      Clothing:                     

Charge Accounts: N/A

Name of Account	Monthly Payment	Total Owed on This Acct.
<u>                    </u>	\$ <u>                    </u>	\$ <u>                    </u>
<u>                    </u>	\$ <u>                    </u>	\$ <u>                    </u>
<u>                    </u>	\$ <u>                    </u>	\$ <u>                    </u>

9. Do you have any other debts? (List current obligations, indicating amounts and to whom

they are payable. Do not include account numbers.)

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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes \_\_\_ No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

N/A — "Criminal Proceeding"

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

DATE

SIGNATURE OF APPLICANT

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PAUPERIS, Case No. \_\_\_\_\_

Case Number: \_\_\_\_\_

**CERTIFICATE OF FUNDS**

**IN**

**PRISONER'S ACCOUNT**

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Michael J. Crummer for the last six months at

[prisoner name]

Pelican Bay State Prison where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 0 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 0.

Dated: 6-15-08

[Signature]  
[Authorized officer of the institution]

CALIFORNIA DEPARTMENT OF CORRECTIONS  
 PELICAN BAY STATE PRISON  
 INMATE TRUST ACCOUNTING SYSTEM  
 INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: APR. 01, 2008 THRU MAY 08, 2008

ACCOUNT NUMBER : V85939 BED/CELL NUMBER: BF04L 000000107L  
 ACCOUNT NAME : CRUMMER, MICHAEL JASON ACCOUNT TYPE: I  
 PRIVILEGE GROUP: B

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
03/17/2008	H200	GENERAL HOLD	4054 ID	5.00

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	5.00	0.00

CURRENT  
 AVAILABLE  
 BALANCE

5.00-

CALIFORNIA DEPARTMENT OF CORRECTIONS  
 PELICAN BAY STATE PRISON  
 INMATE TRUST ACCOUNTING SYSTEM  
 INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: MAR. 01, 2008 THRU APR. 08, 2008

ACCOUNT NUMBER : V85939

BED/CELL NUMBER: BF04L 000000107L

ACCOUNT NAME : CRUMMER, MICHAEL JASON

ACCOUNT TYPE: I

PRIVILEGE GROUP: B

TRUST ACCOUNT ACTIVITY

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03/17/2008	H200	GENERAL HOLD	4054 ID	5.00

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	5.00	0.00

CURRENT  
AVAILABLE  
BALANCE

5.00-

CALIFORNIA DEPARTMENT OF CORRECTIONS  
PELICAN BAY STATE PRISON  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 01, 2008 THRU FEB. 06, 2008

ACCOUNT NUMBER : V85939

BED/CELL NUMBER: AF03L 000000113U

ACCOUNT NAME : CRUMMER, MICHAEL JASON

ACCOUNT TYPE: I

PRIVILEGE GROUP: B

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

CURRENT HOLDS IN EFFECT				
DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
02/01/2008	H118	LEGAL COPIES HOLD	3336	17.60

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	17.60	0.00
					CURRENT AVAILABLE BALANCE
					17.60-



CALIFORNIA DEPARTMENT OF CORRECTIONS  
 PELICAN BAY STATE PRISON  
 INMATE TRUST ACCOUNTING SYSTEM  
 INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: DEC. 01, 2007 THRU JAN. 08, 2008

ACCOUNT NUMBER : V85939 BED/CELL NUMBER: AF05L 000000107U  
 ACCOUNT NAME : CRUMMER, MICHAEL JASON ACCOUNT TYPE: I  
 PRIVILEGE GROUP: B

TRUST ACCOUNT ACTIVITY

\* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT \*  
 \* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. \*

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	0.00	0.00
					CURRENT AVAILABLE BALANCE
					0.00

0150 WPA/ Document 2 Filed 07/07/2008  
CALIFORNIA DEPARTMENT OF CORRECTIONS  
PELICAN BAY STATE PRISON  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: OCT. 01, 2007 THRU NOV. 07, 2007

ACCOUNT NUMBER : V85939                      BED/CELL NUMBER: AF0SL 000000107U  
ACCOUNT NAME : CRUMMER, MICHAEL JASON       ACCOUNT TYPE: I  
PRIVILEGE GROUP: B

**TRUST ACCOUNT ACTIVITY**

\* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT \*  
\* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. \*

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

### TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	0.00	0.00

CURRENT  
AVAILABLE  
BALANCE

0.00

CALIFORNIA DEPARTMENT OF CORRECTIONS  
 PELICAN BAY STATE PRISON  
 INMATE TRUST ACCOUNTING SYSTEM  
 INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: AUG. 01, 2007 THRU SEP. 10, 2007

ACCOUNT NUMBER : V85939  
 ACCOUNT NAME : CRUMMER, MICHAEL JASON  
 PRIVILEGE GROUP: B

BED/CELL NUMBER: AF05L 000000107U  
 ACCOUNT TYPE: I

TRUST ACCOUNT ACTIVITY

\* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT \*  
 \* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. \*

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	0.00	0.00
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CURRENT AVAILABLE BALANCE
0.00
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